

#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) 

### (CFA-4) **Summary Sheet**

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TOTAL PAGES IN ENTIRE CFA-4 REPORT 3

9

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

PEGGY BEAYER
CLERK

STHIS AN AMENDMENT? X Yes NO

COM	IMITTEE INFORMATION					
Full Name of Committee (as on Statement of Organization)	Check if this is a new na	ame				
Committee to Elect Lee Clark Hamilton Cour	Committee to Elect Lee Clark Hamilton County Commissioner					
			nmittee Telephone Number			
		( 317	7)75	5-8386		
4. Mailing Address (address where all campaign finance correspond	dence is received) X Chec	ck if this i	is a new add	dress		
501 Pennsylvania Parkway, Suite 155						
5. City, State, ZIP Code		6. Party	ty Affiliation (if applicable)			
Indianapolis, IN. 46280		Republi	lican			
CANDIDATE INFORMA	ATION (For Candidate's Co	ommitte	es Only)			
7. Full Name of Candidate (include any nickname)		8. Party	y Affiliation or If Independent Candidate			
Lee Clark		Republi	can			
9. Office Sought (Include district number, if any. Not required for e	exploratory committee.)	10. Cou	nty of Resid	dence Hamilton		
Hamilton County Commissioner						
TYPE OF REPOR	RT			CONVENTIO	N CANDIDATES ONLY	
11. Check one:				Check one:		
Pre-Primary Pre-Election Annual Nomination Other			Pre-Convention		rention	
X Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasu	rer (within 10 days amend Statement of Or	ganization)		Post-Con	vention	
12. Reporting Period:	- <del>-</del>			UMN A	COLUMN B	
From: 01/01/13 Thro	ugh:6/30/2014			Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting	g period.		0.00		4.44	
14. Cash on hand and investments January 1, current year.					4.41	
CONTRIBUTIONS AND RECE (Note: these amounts include in-kind contributions and loans, as we						
15a. Itemized (use Schedule A)	en as cash continuations.		0.00		0.00	
15b. Unitemized			4.41		0.00	
15c. Add lines 15a and 15b in both columns	SUBTO	OTAL	7.71			
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Colu	ımn B To	OTAL	4.41		0.00	
EXPENDITURES						
(Note: These amounts include in-kind expenditures and loan repayments.)						
17a. Itemized (use Schedule B) (Public Question: use Schedule C)			4.41			
17b. Unitemized						
17c. Add lines 17a and 17b in both columns SUBTOTAL			4.41		4.41	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL			0.00			
19. Debts OWED BY the committee (use Schedule D)			0.00			
20. Debts OWED TO the committee (use Schedule E)			0.00	engel Lifes Lifes		
	ATION		_	E F	OFFICE USE ONLY	
KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE:						
			2			
	esser	7	7 -/ ·	-/45MM		
			Pate /	Y A A	10.00	
			7/1/	14 8 E	တ္တ	



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Indiana Election Commission (IC 3-9-5-14)

# (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. PNC Bank 21 North Range Line	Contributions: Direct In-Kind (describe)	4.41		
Carmel, IN. 46032	Other Receipts:  Interest Loan  Misc. (specify)			
Contributor's Occupation (if required)				
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
3.	Contributions:  Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
Contributor's Occupation (if required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:  Interest Loan  Misc. (specify)			
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	\$4.41		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEN	ON THE LAST PAGE ONLY 1 15a of the Summary Sheet)	\$4.41		

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# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

FILE NUMBER						
	Page1		of			

			1			
PUBLIC QUESTION INFORMATION  Enter Text of Public Question						
Enter 18XLOI FUDIIC QUESTION						
Type of Question: Statewide Local Position: Supported Opposed						
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	PIENT'S OCCUPATION  TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE		
JDRF  10401 N. Meridian Street, Suite 150  Carmel, IN. 46290	Direct in-Kind Payment of Debt Returned Contribution Other Purpose: CLOSE ACCOUNT	4.41		6/26/14		
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:					
Code	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:					
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:					
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:					
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:					
	SUBTOTAL THIS PAGE OF SCHEDULE C	\$4.41				
	SCHEDULE C ON THE LAST PAGE ONLY total on ITEM 17a of the Summary Sheet	\$4.41				
1-1:10						